

STATE OF SOUTH CAROLINA

(Caption of Case)

Example: Application for a Class C Charter Certificate from
John Doe dba Doe's Limo

GPS Transportation, LLC

BEFORE THE
PUBLIC SERVICE COMMISSION
OF SOUTH CAROLINA

TRANSPORTATION COVER SHEET

DOCKET

NUMBER: 2011 - 174 - T

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

(Please type or print)

Submitted by: Shakena Pough

Telephone: 917-628-3511

Address:

Fax: 803-747-7080

Other: 803-290-1576

Email: gpstransportationllc@gmail.com

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

NATURE OF ACTION (Check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Application - Class A/A Restricted | <input type="checkbox"/> Request for Name Change on Certificate |
| <input type="checkbox"/> Application - Class C Taxi | <input type="checkbox"/> Request to Amend Scope of Authority |
| <input type="checkbox"/> Application - Class C Charter | <input type="checkbox"/> Request to Amend Tariff (rate increase, etc.) |
| <input type="checkbox"/> Application - Class C Charter Bus | <input type="checkbox"/> Request to Amend Passenger Limit |
| <input checked="" type="checkbox"/> Application - Class C Non-Emergency | <input type="checkbox"/> Request |
| <input type="checkbox"/> Application - Class C Stretcher Van | <input type="checkbox"/> Exhibit |
| <input type="checkbox"/> Application - Class E Household Goods | <input type="checkbox"/> Late-Filed Exhibit |
| <input type="checkbox"/> Application - Class E Hazardous Waste | <input type="checkbox"/> Letter |
| <input type="checkbox"/> Application | <input type="checkbox"/> Proposed Order |
| <input type="checkbox"/> Request for Extension to Comply with Order | <input type="checkbox"/> Publisher's Affidavit |
| <input type="checkbox"/> Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded | <input type="checkbox"/> Reservation Letter |
| <input type="checkbox"/> Request for Cancellation of Certificate | <input type="checkbox"/> Response |
| <input type="checkbox"/> Request for Suspension | <input type="checkbox"/> Return to Petition |
| <input type="checkbox"/> Request for Reinstatement | <input type="checkbox"/> Other: _____ |

RECEIVED

APR 26 2011

PSC SC
CLERK'S OFFICE

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
101 Executive Center Drive, Suite 100
Columbia, South Carolina 29210
(Mailing address: Post Office Drawer 11649, Columbia, SC 29211)

Phone: (803) 896-5100 Fax: (803) 896-5199

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR
OPERATION OF MOTOR VEHICLE CARRIER

RECEIVED

CLASS C - NON-EMERGENCY

APR 26 2011

Date: 4-25-2011

PSC SC
CLERK'S OFFICE

Application is hereby made for a Certificate of Public Convenience and Necessity, in accordance with the provision of S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.

1. Name under which business is to be conducted (corporation, partnership, or sole proprietorship, with or without trade name.)

GPS Transportation, LLC

272 Louise Drive Orangeburg, SC 29115

Street Address of Applicant

PO Box 1578 Orangeburg, SC 29116

Mailing Address of Applicant if different from street address

917-628-3511

Phone

803-747-7080

Fax

gpstransportationllc@gmail.com

Email Address

2. If incorporated, a copy of Articles of Incorporation must be attached. (If incorporated outside of SC, attach SC Secretary of State "Foreign Corporation" Certificate.)

3. Select Entity Type: (Check one)

☐ Individual Owner/Sole Proprietorship

☒ Partnership - List names and address of all person having an interest in the business.

☐ Corporation - List names and addresses of two principal officers.

Shakena Pough 1120 Wolfe Trail Apt. 278 Orangeburg, SC 29115

Aaron Pough 1120 Wolfe Trail Apt. 278 Orangeburg, SC 29115

Antwain Pough 1120 Wolfe Trail Apt. 278 Orangeburg, SC 29115

Applicant is financially able to furnish the services as specified in this application and submits the following statement of assets and liabilities.

BALANCE SHEET

Balance at Time Application is Filed:

Month April Year 2011

Assets:

Cash	\$1500.00
Receivables	N/A
Real Estate	N/A
Buildings and Equipment (Net)	N/A
Motor Vehicles (Net)	\$3500.00
Garage Equipment (Net)	N/A
Machinery and Tools (Net)	N/A
Supplies on Hand	N/A
Prepays and Other Assets	N/A
Total Assets	\$5000.00
<u>Liabilities and Equity:</u>	
Accounts Payable	\$250.00
Notes Payable	\$250.00
Mortgages Payable	N/A
Equipment Obligations	N/A
Accrued Salaries and Wages	N/A
Other Accrued Obligations	N/A
Other Liabilities	N/A
Total Liabilities	\$500.00
Capital Stock	N/A
Retained Earnings	N/A
Total Equity	N/A
Total Liabilities and Equity	N/A

PROPOSED RATES AND CHARGES FOR SERVICE

Maximum Proposed Rates and Charges for Service are as follows:

\$3.75 PER MILE

Counties to be Served:

State of South Carolina

Maximum Number of Passengers per Vehicle:

7 Passengers

DESCRIPTION OF EQUIPMENT

[illegible]

* Designate if equipped with a wheelchair lift by using "HC" (Handicapped.)

INSURANCE QUOTE

RECEIVED

APR 26 2011

PSC 50
CLERK'S OFFICE

The following insurance quote is for:

CePS Transportation, LLC
(Name of Motor Carrier)
85 Doodle Hill Road St Matthews, SC 29135
(Address of Motor Carrier)

Amount of Premium:

Liability Insurance 1,000,000 - 1000 medical
2718.00

The above quoted premium is for a term of 12 months.

Minimum Limits - Intrastate Only:

1 - 7 passengers	-	25,000/50,000/25,000
8 - 15 passengers	-	25,000/100,000/25,000

National Casualty Ins
(Insurance Company Name)
3654 S Frby Street Florence, SC 29505
(Home Office Address of Company)

is familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.

4-26-2011 Jerry Paston 843-407-5082
Date (Authorized Insurance Company Representative)

HOSPITALITY INSURANCE AGENCY

QUOTE

March 22, 2011

HOSPITALITY INSURANCE AGENCY, LLC
3654 S IRBY STREET
FLORENCE, SC 29505

RE: S N S TRANSPORTATION SERVICES, LLC

COMMERCIAL INSURANCE COMPANY IS OFFERING A Quote on the above risk per the following:

OPTION 1

Liability (1 car)	1,000,000	\$ 2718.00
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UM/UIM	75,000	
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MEDICAL	1,000	
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PHYSICAL DAMAGE 6,000 1000 DED	\$ 288.00
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GENERAL LIABILITY 1000000-2000000	\$ 1166.00
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Total ANNUAL Premium	\$ 3924.00
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FILING FEES	\$ 40.00
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DEPOSIT	\$ 816.80
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Plus 10 Monthly Installments of	\$ 341.73
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Thank you for the Opportunity!!!

Jerry Poston
843-407-5082
www.hospitality-ins.com

Exhibit FWA

GPS Transportation, LLC
Name

U.S.D.O.T No.

ICC No.

1. Is there currently any outstanding judgments against the Applicant?

☐ Yes

☒ No

If Yes, indicate nature of judgement(s) against applicant.

2. Is Applicant familiar with all statutes and regulations, including safety regulations and governing for-hire motor carrier operations in South South Carolina, and does Applicant agree to operate in compliance with these statutes and regulations?

☒ Yes

☐ No

3. Is Applicant aware of the Commission's insurance requirements and the insurance premium costs associated therewith?

☒ Yes

☐ No

Exhibit on Driver Qualifications

1. Applicant understands that drivers must possess at least a current American Red Cross Standard First Aid and CPR Certificate or its equivalent, and records that verify/record such training must be kept on file at the company's primary place of business within South Carolina.

☒ Yes ☐ No

2. Applicant understands that drivers must be in compliance with all OSHA regulations.

☒ Yes ☐ No

3. Applicant understands that drivers must be trained in the use of all vehicle installed safety equipment such as two-way radios, first-aid kits, fire extinguishers, and other equipment as outlined in PSC Regulations.

☒ Yes ☐ No

4. Applicant understands that drivers must be able to physically perform actions necessary to assist persons with disabilities, including wheelchair users.

☒ Yes ☐ No

5. Applicant understands that drivers must wear a professional uniform and photo identification badge that easily identifies the driver and the company for whom the driver works.

☒ Yes ☐ No

6. Applicant understands that drivers must complete twelve (12) hours of in-service training annually in the area of safety, and records that verify/record such training must be kept on file at the company's primary place of business within South Carolina.

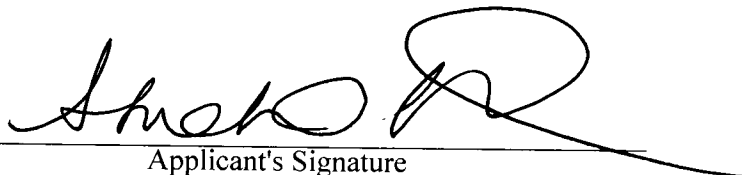
☒ Yes ☐ No

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
POST OFFICE DRAWER 11649
COLUMBIA, SOUTH CAROLINA 29211

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Vol.26, S.C. Code Ann., 1976), and R.38-400 through 38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Vol.23A, S.C. Code Ann.,1976) and amendments thereto, and hereby promises compliance therewith.

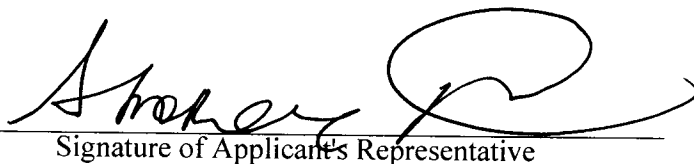
STATE OF SOUTH CAROLINA


COUNTY OF _____


Applicant's Signature

I, Shahena Paygh, President
Name of Applicant's Representative Title
of GPS Transportation, LLC,
Applicant

the Applicant for the Certificate of Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above application are true and correct.


Signature of Applicant's Representative

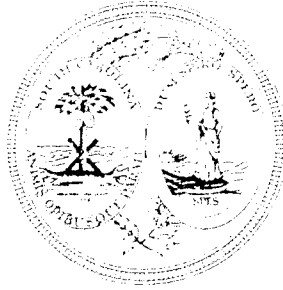
SWORN TO BEFORE ME
This 25 day of April, 2011


Notary Public

Commission Expires AUG 11, 2020

CARNARRI COFIELD
Notary Public - State of South Carolina
My Commission Expires August 11, 2020

The State of South Carolina




Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

GPS TRANSPORTATION, LLC, A Limited Liability Company duly organized under the laws of the State of South Carolina on April 25th, 2011, with a duration that is at will, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to section 33-44-809 of the South Carolina Code, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great
Seal of the State of South Carolina this
25th day of April, 2011.


Mark Hammond, Secretary of State